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CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for First class or Express mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, Group Art Unit 2157, (703) 872-8306 on the date indicated below.

Date: April 21, 2004Name: Jacqueline WilsonSignature: Jacqueline Wilson

Re: Patent Application for:
"Method and Apparatus for Selective Network Access"
Serial No. 09/438,431
Attorney Docket No. P12817-US1

Dear Sir or Madam:

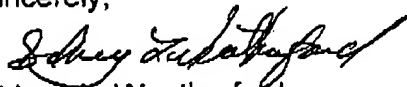
Enclosed for filing please find the following items relating to the above-identified application:

- (1) Transmittal Letter (1 page)
- (2) Response under 37 C.F.R §1.111 (13 pages)

There is no additional fee for this filing. The commissioner is hereby authorized to charge payment of any additional filing fees required associated with this communication or credit any overpayment to Deposit Account No. 50-1379.


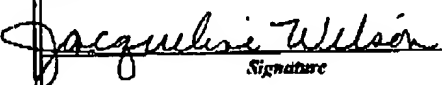
If you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972-583-8656.

Sincerely,


Sidney L. Weatherford
Intellectual Property Counsel

SLW/jw



AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. P12817-US1		
Applicant(s): Phillipe Charas et al.					
Serial No. 09/438,431	Filing Date November 12, 1999	Examiner Abdullahi Elmi Salad	Group Art Unit 2157		
Invention: Method and Apparatus for Selective Network Access					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	24	25	0	x \$18.00	\$0.00
INDEP. CLAIMS	4	4	0	x \$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-1379 in the amount of \$0.00 . A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1379 . A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Sidney L. Weatherford Reg No. 45,602			Dated: April 21, 2004		
Ericsson Inc. 6300 Legacy Drive, M/S EVR 1-C-11 Plano, TX 75024			<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; font-size: small;">Certificate of Mailing or Transmittal</p> <p style="font-size: x-small;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for First class or Registered Mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.</p> <p style="text-align: right;"> Signature</p> <p style="text-align: right;">Jacqueline Wilson 04/21/04</p> <p style="text-align: right; font-size: x-small;">Depositor's Name and Date</p> </div>		
cc:					

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